

EXHIBIT C

08/03/2023

Angeles, Daisy

Aimee Sturgill v. The American Red Cross

Designations

Designation	Count
● Red Cross Designation	13

1 UNITED STATES DISTRICT COURT
2 EASTERN DISTRICT OF MICHIGAN

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6 AMIEE STURGILL,
7 Plaintiff,

8

9 - vs. - Case No. 2:22-CV-11837

10

11 THE AMERICAN RED CROSS,
12 Defendant.

13 _____/

14

15 DEPOSITION OF

16 DEPONENT: DR. DAISY ANGELES

17 DATE: Thursday, August 3, 2023

18 TIME: 9:08 a.m.

19 LOCATION: 2785 E. Grand Blvd.

20 Detroit, Michigan

21

22 REPORTED BY: JENNIFER CLAUSON, CSR-6867

23 Fortz Legal Support, LLC

24 (844) 730-4066

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1 { I N D E X }

2 WITNESS PAGE

3 ----- ----

4 DR. DAISY ANGELES

5 Examination by Ms. Shannon.....4

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10 E X H I B I T S PAGE # MARKED

11 -----

12 Deposition Exhibit No. 1.....7, 8

13 Deposition Exhibit No. 3.....10, 13, 14, 20, 27, 38

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27 **No Exhibit 2 in this deposition.

1 Detroit, Michigan

2 Thursday, August 3, 2023

3 At or about 9:08 a.m.

4 * * * * *

5 THE REPORTER: Do you swear or affirm the
6 testimony you are about to give is the truth, the whole
7 truth, and nothing but the truth?

8 A. Yes.

9 THE REPORTER: Thank you.

10 EXAMINATION

11 BY MS. SHANNON:

12 Q. Good morning, Dr. Angeles.

13 A. Good morning.

14 Q. Am I saying your name correctly?

15 A. Correct, yeah.

16 Q. Okay. Great. Can I have you briefly state and spell your
17 name for the record?

18 A. Okay. First name is Daisy, D as in David, A-I-S-Y.

19 Angeles, A-N-G-E-L-E-S.

20 Q. I'd like to quick introduce myself. I know we met briefly
21 out in the hallway. My name is Jannell Shannon. I'm the
22 attorney from Ballard Spahr, who's the law firm and we
23 represent the American Red Cross. Jenny over here is the
24 court reporter and she'll be taking down everything we
25 say. One quick question plaintiff's counsel I'm noting

1 for the record is not present. Have you had any
2 communications with plaintiff's counsel, that would be
3 Colin Wilkin and Noah Hurwitz, with Hurwitz law? Have you
4 had any communications with them?

5 A. No, I just called the patient. I said I was going to
6 release the records. I'm the primary care physician.

7 Q. And is the patient Amiee Sturgill?

8 A. Correct.

9 Q. And what did Amiee tell you, if anything, during that
10 call?

11 A. It was a message on the machine.

12 Q. Got it. Okay. And we'll circle back to that in just a
13 bit, but have you ever been deposed before?

14 A. 35 years ago maybe.

15 Q. Okay. And what type of matter was that, if you recall?

16 A. It was a very complication for an alcoholic woman.

17 Q. All right. Anything else --

18 A. (Witness nodding head negatively.)

19 Q. -- that necessitated deposition? Well, since it's been
20 awhile, give you just a couple reminders. I'm sure you
21 might be familiar with them even from 35 years ago, but
22 I'll be asking questions. If you answer the questions,
23 I'll assume that you understand them. If there's
24 something that you don't understand, feel free to ask.

25 A. Okay.

1 Q. And I can rephrase. Our answers will need to be audible
2 because we have a court reporter taking down everything
3 that we say. Court reporters can't really record head
4 nods or head shakes. So we do have to --

5 A. Say the words.

6 Q. -- yeah, say the words, answer yes or no, you've got it.
7 We'll need to speak one at time and clearly again for
8 purposes of transcribing the record. I'm a fast talker.
9 I make a conscious effort to slow down. I don't believe
10 the same is true for you. You seem very steady. So I
11 don't have concerns there, but if you were a fast talker,
12 you recall want to do the same.

13 I don't anticipate this deposition will take
14 very long, but if we need it, we can take regular breaks.

15 A. Okay.

16 Q. If you need a break, feel free to ask for one at any time.
17 I'll just ask for you to answer any pending question.

18 You also, and I'm sure your counsel has
19 informed you of this or was intending to inform you after
20 the deposition, but you have the right to review any
21 answers that you give today. You can make typographical
22 changes, but substantive fixes are not usually permitted.

23 Again, that's something that would not be my duty
24 necessarily to advise you on, but just wanted to make that
25 clear and the one main rule of depositions is just to

1 answer the questions truthfully and to the best of your
2 knowledge. If you forget any other of these pointers,
3 don't forget that one. That's all deposition testimony is
4 given under penalty of perjury just like you're at trial.

5 And that's all I have for initial matters.

6 Have you brought anything with you? I see
7 some documents.

8 A. These are the records.

9 Q. Yeah, it looks like that is the subpoena on top there?

10 A. The subpoena records from the office.

11 Q. Okay.

12 (Off the record at 9:12 a.m.)

13 (Back on the record at 9:12 a.m.)

14 Q. (BY MS. SHANNON): Dr. Angeles, I'm handing you what's
15 been previously marked as Defendant's Exhibit 1. Can you
16 turn to it's page -- should be Page 7 of the document
17 that's before you that's marked as Defendant's Exhibit 1.

18 And let me know --

19 A. This one?

20 Q. Yes. Let me you know if you recognize it. It would be
21 the subpoena. It's just a copy of the subpoena.

22 A. This one?

23 MR. KRASKA: Yeah, there's no page number.

24 Q. (BY MS. SHANNON): Here. And, Dr. Angeles, I'm
25 representing this is Page 7, eight, and nine of

1 Defendant's Exhibit 1. Do you recognize this?

2 A. Yes.

3 Q. And what is it?

4 A. This is a subpoena to testify.

5 Q. And is this a subpoena to testify that you received?

6 A. A deposition of civil action. Do I just read them?

7 Q. You don't have to read it. Is this the subpoena that you
8 received?

9 A. Yes, I received a subpoena.

10 Q. And that's how you recognize it --

11 A. Correct.

12 Q. -- that you received the document? Does this appear to be
13 a true and accurate copy of the subpoena?

14 A. Yes.

15 Q. Okay. We can put that aside. That's all I need to do
16 there.

17 A. Okay.

18 Q. And the other documents that you brought with you those
19 look like they could be the medical records --

20 A. Yes.

21 Q. -- is that correct? Okay. I'll jump into our substantive
22 questions and we'll get going.

23 Dr. Angeles, what's your current occupation?

24 A. I'm a medical physician, medical doctor.

25 Q. Do you have a specialty?

1 A. I'm a general medicine, primary care.

2 Q. And backing up, how did you get to that position? Can you
3 describe your schooling, your medical schooling, briefly?

4 You don't have to go into detail.

5 A. Yeah. I went to school at -- in the Philippines. The
6 University of Santo Tomas. And I had my internship at St.
7 Mary's Hospital in Wisconsin and repeat internship at
8 Oakwood Hospital and residency in medicine at Oakwood
9 Hospital in Dearborn, Michigan.

10 Q. And how long have you been in -- well, strike that.

11 What is the hospital or facility that you
12 currently work for?

13 A. I work for myself as a solo partitioner.

14 Q. And how long have you been doing that?

15 A. Since '79, 1979.

16 Q. Must be very successful. Many attorneys would be jealous
17 of that. So that's good for background. I want to just
18 focus on this case now. So we talked about your patient,
19 Amiee Sturgill. Do you recall her independently without
20 having to review medical records?

21 A. What is that again?

22 Q. Do you -- so Amiee Sturgill, your former patient, when I
23 say that name, do you have -- does an image come to mind,
24 do you independently recall her, or do you have to review
25 records?

1 A. I recall her, but if you ask me some questions, I have to
2 refer to the records.

3 Q. That makes sense. What do you recall about Amiee just off
4 the top of your head?

5 A. She's about 40 some years old lady and she comes to the
6 office for minor medical treatment.

7 Q. And I have medical records.

8 MS. SHANNON: Jenny, can you admit these as
9 Defendant's Exhibit 3, I believe, we left off on two
10 yesterday?

11 (Deposition No. Exhibit 3 marked for
12 identification at 9:17 a.m.)

13 Q. (BY MS. SHANNON): Dr. Angeles, Jenny's handed you what's
14 been marked as Defendant's Exhibit 3, I'll open this
15 binder to you and represent that the documents are
16 three-hole punched and placed in a binder.

17 Dr. Angeles, do you recognize the documents
18 in front of you?

19 A. Yes.

20 Q. How do you recognize them? Have you seen them before?

21 A. I have seen this record before.

22 Q. To your knowledge, is this a true and correct copy of the
23 medical records --

24 A. Correct.

25 Q. -- for Ms. Sturgill? I'd like to walk through the

1 records. I'm not going to go page by page. I'll point
2 out some pages and we'll jump to those. But first
3 overall, can you recall the dates that you treated Amiee
4 Sturgill.

5 A. I treated here 2011 up to 2021.

6 Q. Do you recall the circumstances that she came to see you
7 first? Was it a -- and I'll refer you, was it a referral,
8 did she independently seek you out for care?

9 A. She independently seeked me out for care.

10 Q. Okay. And feel free to look at the records for these next
11 questions. What conditions did plaintiff suffer from?

12 A. First time? The first time you said?

13 Q. Just generally?

14 A. For respiratory infection, for irrigations, and diarrhea,
15 foot problems, general medicine.

16 Q. Do you recall did she have Crohn's disease?

17 A. Excuse me.

18 Q. Crohn's disease?

19 A. She has Crohn's disease from the gastroenterologist.

20 Q. And did she have issues becoming pregnant to your
21 knowledge?

22 A. Yes.

23 Q. Did she have issues remaining pregnant to your knowledge?

24 A. She has three kids.

25 Q. She had some miscarriages in there though, correct?

1 A. Yes.

2 Q. I'd like to refer you to Page 92. And before we jump into
3 this page, one other condition that I forgot to mention
4 does Amiee suffer from anxiety?

5 A. Yes.

6 Q. Okay. And that's noted in the records. So Page 92 could
7 you explain what is this? It looks like a test result.
8 Could you just walk me through what this is?

9 A. This Methyltetrahydrofolate reductase is an enzyme that is
10 responsible for the production of a cell.

11 Q. And did Amiee Sturgill have a gene mutation that affected
12 how she processed that?

13 A. She has a variant of the -- yeah, variant of C677T and
14 A1298C.

15 Q. Would that be commonly referred to as gene mutation?

16 A. Yes.

17 Q. Okay. There's another term for them, you know, but just a
18 shorthand. So if we discuss it and that's -- it's
19 referred to elsewhere in documents as a gene mutation,
20 although I might be recalling other physicians' records.
21 So you were aware that plaintiff had a
22 mutation, correct?

23 A. Yes.

24 Q. And she had tests done and it seemed like that could be
25 related to pregnancy losses, correct?

1 A. Correct.

2 Q. And looking in here, it's related to a number of other
3 conditions. It looks like there are cardiovascular
4 concerns that could accompany the gene mutation, is that
5 right?

6 A. It was -- it was mentioned, yes.

7 Q. And one thing I'm particularly interested in is the
8 thromboembolism. Can you explain what that is?

9 A. Thromboembolism is a formation of blood clots.

10 Q. Was Amiee Sturgill concerned with getting blood clots?

11 A. Not that I know of except related to pregnancy.

12 Q. And what other medical concerns any would arise in a
13 person with this mutation?

14 A. There are many diseases connected with it, but actually,
15 according to some literatures, I couldn't quote them now,
16 that it can cause coronary artery disease because of the
17 high episodes of thromboembolism, pregnancy loss. Related
18 to clotting disorder.

19 Q. So generally blood clotting was a concern for Amiee, is
20 that correct?

21 A. That was understood from the Jillian.

22 Q. The pregnancy loss was a concern for Amiee, correct?

23 A. Correct.

24 Q. Can you turn to Page 79? It's the packet of pages. Dr.

25 Angeles, do you recognize Page 79 of Defendant's Exhibit

1 3?

2 A. Yes, I do.

3 Q. And what is it?

4 A. I gave her excuse for not getting a flu shot.

5 Q. And do you recall the circumstances under which this
6 letter that's indicated on Page 79 of Defendant's Exhibit

7 3 was written?

8 A. Circumstances.

9 Q. Yes.

10 A. Okay. This was dated on 2018 and at the time -- let me
11 refer to my --

12 Q. And just to represent on the page we were just on, Page
13 92, that discussed the gene mutation, it does have a date
14 of October 23rd, 2018 at the very top.

15 A. What was your question again regarding?

16 Q. My question was do you recall the circumstances of when
17 this letter was written? And actually, I'm going to have
18 you just quick go to Page 92 and can you confirm that this
19 gene mutation report was issued on October 23rd, 2018? I
20 just want to make sure I got the right date associated
21 with this document.

22 A. This October 19, yes.

23 Q. That's when it was issued?

24 A. It was drawn, yeah.

25 Q. Okay. Great. We can turn back to 79. Page 79, and this

1 is the letter regarding a medical accomodation request and
2 this is dated November 9th, 2018, is that correct?

3 A. Correct, yeah.

4 Q. And so that's about a little over two weeks after her
5 initial gene test results --

6 A. Correct.

7 Q. -- is that correct? And do you recall the circumstances
8 under which this letter was written?

9 A. Circumstance was that she did not want to accept the flu
10 vaccine.

11 Q. Do you recall why?

12 A. She gave me the reason of the positive MTHFR genetic
13 findings.

14 Q. And the letter says, quote, Amiee Sturgill has MTHFR
15 genetic mutation and is recommended to refrain from
16 vaccinations. MTHFR affects detoxication. This can lead
17 to higher susceptibility to heavy metal toxicity from any
18 source, end quote.

19 Is one of the symptoms of the gene mutation
20 the decrease ability to process heavy metals?

21 A. Supposedly at the time.

22 Q. Do you recall is that why Amiee Sturgill didn't want to
23 receive the vaccine?

24 A. The flu vaccine, yes.

25 Q. Do you recall did Amiee Sturgill have any other concerns

1 about the flu vaccine?

2 A. No.

3 Q. Are there heavy metals in vaccinations to your knowledge?

4 A. No.

5 Q. Just circling back to this, it said the letter is a

6 medical accomodation support document that said that Amiee

7 Sturgill's gene mutation could lead to higher

8 susceptibility to heavy metal toxicity and exempting her

9 from vaccinations. What was the connection between the

10 heavy toxicity and vaccinations?

11 A. At the time, the MTHFR was supposed to be a -- some sort

12 of a contraindication to vaccines, but I'm not an expert

13 on -- I'm not an infectious disease expert nor am I a

14 geneticist.

15 Q. That makes sense. And you just have to testify to what

16 you know of and that's -- that all makes sense.

17 Is there any indication now that individuals

18 with the MTHFR gene mutation should not receive

19 vaccinations?

20 A. No.

21 Q. So to your knowledge, they should?

22 A. They should.

23 Q. Okay. We can move on from that. Page 49. Dr. Angeles,

24 do you recognize this letter?

25 A. Yes.

1 Q. And this it looks like is a letter commenting on Ms.

2 Sturgill's cardiac examination from a Dr. Sohal, correct?

3 A. Yes.

4 Q. Did Amiee Sturgill have any cardiac concerns?

5 A. She has a family history and so she was -- she wanted to
6 be checked by a cardiologist.

7 Q. And when you say be checked, what would that entail?

8 A. That would be a full cardiac evaluation, the cardiologist.
9 So I referred her to the cardiologist.

10 Q. Are there any tests done to gage susceptibility for blood
11 clotting as far as that cardiac examination?

12 A. We start with the lipid profile cholesterol. Her lipid
13 profiles are actually normal.

14 Q. And if you turn to Page 54 since we're in the ballpark of
15 just a couple questions. There are some words that I need
16 you to interpret for me because I'm not a doctor.

17 On Page 54 under the cardiovascular sub
18 heading, it's on the second line, quote, dyspnea, I don't
19 believe I'm pronouncing that correctly. On exertion with
20 moderate activity, comma, with prolonged activity.
21 Orthopnea denies, end quote. Can you explain for me what
22 is the first word dys -- D-Y-S-P-N-E-A?

23 A. It's the shortness of breath on exertion.

24 Q. And can you explain what the second strange word is,
25 O-R-T-H-O-P-N-E-A?

1 A. Orthopnea means shortness of breath when they're lying
2 down.

3 Q. Thank you. And we can move onto Page 3 just some
4 questions about Amiee Sturgill's pregnancy.

5 Looking on Page 3 under a bold texts,
6 there's an indication of oh, goodness. A third of the way
7 through the document history of pregnancy loss, comma, not
8 currently pregnant, end quote. Did you treat Amiee
9 Sturgill during any of her pregnancies?

10 A. No.

11 Q. Do you recall anything about Amiee Sturgill's pregnancies?

12 A. She would just tell me that she had pregnancy loss.

13 Q. And how was Amiee Sturgill -- what was her disposition
14 towards the losses?

15 A. She was grief stricken.

16 Q. Did you get the -- were you under the understanding that
17 Amiee Sturgill pretty much wanted the pregnancies?

18 A. Correct.

19 Q. Were you under the understanding that Amiee Sturgill would
20 have done anything to keep a pregnancy?

21 A. Yes.

22 Q. Did you get the impression that Amiee Sturgill was
23 concerned about the outcome of her pregnancies when she
24 got pregnant?

25 A. Yes.

1 Q. And at one point, she had a D&C, correct?

2 A. Correct.

3 Q. And that was to remove field demise, correct?

4 A. Yes.

5 Q. Is there another word that you would use for that? Just
6 would it be a miscarriage?

7 A. Yes, miscarriage is the --

8 Q. And what does D&C stand for?

9 A. Pardon me.

10 Q. You can finish your last answer. And we'll go back to the
11 question.

12 A. D&C means that dilation and curettage.

13 Q. And do you recall when she had that D&C?

14 A. I have to look at the records. I'm not her OBGYN.

15 Q. That's -- that's fine. Did you get the impression that
16 Amiee Sturgill wanted to have more children after her
17 final pregnancy?

18 A. I don't know.

19 Q. Okay. Did Amiee Sturgill ever communicate that she was
20 wanting to become pregnant at any point when you treated
21 her?

22 A. I treated her from 2011 to 2021, yes.

23 Q. Do you recall any time in 2021, Amiee Sturgill
24 communicating that she wanted to get pregnant?

25 A. I don't recall.

1 Q. Do you recall if Amiee Sturgill was ever on birth control?

2 A. I don't know.

3 Q. And that's fine. It's just to your knowledge.

4 A. Mm-hm.

5 Q. And we can move onto pages -- let's see. Page 2 the top

6 of the column text on Page 2 Defendant's Exhibit 3, Dr.

7 Angeles, it says on the very top of this column text it's

8 in the middle of the document anxiety?

9 A. Yes.

10 Q. What does that indicate?

11 A. Anxiety means person is always anxious about certain

12 things that bothers her.

13 Q. And what does that mean?

14 A. She's worried, anxious about I wouldn't know what bothers

15 her that much.

16 Q. Would you describe it, and by it, I mean, anxious, as

17 taking precautions that in otherwise not an anxious person

18 wouldn't take to prevent a negative outcome?

19 A. She takes precautions to prevent outcomes possibly.

20 Q. Does she take more precautions than in your practice what

21 would you see as a typical person?

22 A. I don't know.

23 Q. Okay. Do you recall or can you look in your notes when

24 she began experiencing anxiety?

25 A. I can find the diagnosis only on 2021. I -- that's the

1 only thing I can recall.

2 Q. Could there be a diagnosis earlier with another physician?

3 A. I don't know.

4 Q. Did you prescribe any medication for Amiee Sturgill
5 related to treating anxiety?

6 A. She was on Sertraline.

7 Q. And what is Sertraline?

8 A. It's a antianxiety medication.

9 Q. If you could turn to Page 21. Dr. Angeles, can you
10 describe what's contained here on Page 21 and I believe
11 just it might -- no, it's just Page 21, it doesn't spill
12 over into 22, what is this document?

13 A. Well, it says that she was not compliant with her
14 medication, Sertraline.

15 Q. Okay. And why did -- this is a letter, it's representing
16 from OPTUM Rx sent. Dr. Angeles, would you know what date
17 this was sent? Is there -- there's a date of July 30th,
18 stamped at the top, July 30th, 2021, is that correct?

19 A. Yeah.

20 Q. And does it just say that she's not getting her Sertraline
21 prescriptions filled?

22 A. Correct.

23 Q. Okay. Did she ever appear anxious in your office?

24 A. There were times that she was worried about things. She
25 never -- yeah, she was worried about things.

1 Q. What types of things?

2 A. Stress is daily life.

3 Q. I'll represent to you --

4 A. I don't remember at this point. It was a long time ago.

5 Q. That's understandable. I'll represent to you that one of

6 her gastroenterologists described her in his notes as

7 terrified, quote, terrified of some treatments. Would you

8 agree with that?

9 A. I treated her for medical conditions that are minor and I

10 don't see -- I didn't feel that she was anxious with

11 treatment for respiratory infection.

12 Q. Was she anxious regarding any treatment that you had

13 prescribed to her? Well, strike that.

14 Was she anxious for any treatment that you

15 had recommended to her?

16 A. The treatments I gave her was minor -- for minor issues,

17 but she was anxious when she had those -- when I had to

18 refer her to cardiology.

19 Q. Did you get the sense that she was just anxious about the

20 results of cardio exam?

21 A. Of course, yes.

22 Q. Did she ever decline any treatment?

23 A. Not that I can recall.

24 Q. Did she decline any medications?

25 A. Pardon me?

1 Q. Did she decline any medications? And we'll get into these
2 medications later.

3 A. I have to look at the records. I don't remember.

4 Q. If she would of declined, would you have put it in the
5 notes?

6 A. Yes, but if I gave her a prescription and she doesn't
7 refill them, I won't know that, yeah.

8 Q. Makes sense. So Page 11, this is called patient injection
9 record. It looks like this represents a number of
10 injections that are indicated to be vaccines on the left
11 side on the left column that Amiee Sturgill received
12 between 2015 and 2018. Does that appear to be correct?

13 A. 2016, '15, up to 2018, yes.

14 Q. And that last date there April 1st, 2018, we discussed
15 earlier plaintiff was diagnosed with that gene mutation in
16 2018, isn't that correct?

17 A. Are you referring to the injections and the MTH?

18 Q. Correct.

19 A. MTH, what was the question again? I'm sorry.

20 Q. I'm just asking if you recall that Amiee Sturgill was
21 diagnosed with the MTHFR gene mutation in 2018? And that
22 would be on Page 92, I believe.

23 A. She had the testing. The October -- the blood test 2019.

24 Q. The blood test looks like it's 2018 if you're looking at
25 Page 92, the October 23rd, 2018 date.

1 A. What was this page?

2 Q. Page 92. And just simply commenting that the last
3 vaccination appears to have occurred just before she was
4 diagnosed with the gene mutation?

5 A. I have to refer to the records.

6 Q. Take your time.

7 A. This vaccination record here are actually medications.

8 They're not vaccines.

9 Q. They're just injectable medications?

10 A. Injectable medication antibiotics, steroids.

11 Q. Well, that's -- can we go down the list? Could you
12 explain B12 injection what would that --

13 A. Vitamin B12 is --

14 Q. -- treat?

15 A. -- when they feel fatigued, we give them injections of
16 Vitamin B12.

17 Q. And number two, the DepoMedrol 40 milligrams, what would
18 that treat?

19 A. That would be for a severe sinus infection. That's some
20 swelling. I don't recall what I gave that to her for.

21 Q. And is that also known as a steroid?

22 A. This is a steroid, DepoMedrol.

23 Q. And I've heard the term steroid before, but can you
24 explain what that encompasses?

25 A. It is an antiinflammatory medication.

1 Q. And number four the Dexamethasone?

2 A. It's a short acting steroid.

3 Q. And was six Rocephin?

4 A. Rocephin is antibiotics.

5 Q. I think that finishes out the list. And again, it looks
6 like 2018 is when the last injection stopped. Is that
7 what the records indicate?

8 A. Yes.

9 Q. Can you turn to Page 107. And, Dr. Angeles, this appears
10 to be notes from a consultation you had with Amiee
11 Sturgill on December 29th, 2017, is that correct?

12 A. This is a consultation from another physician.

13 Q. Oh, and what physician is that? I do see a signature.
14 That's hard to make out on the bottom of Page 1?

15 A. Yeah.

16 Q. And if you turn to Page 109, it appears to be a consult
17 signed by Sandra Aldridge. Is Ms. Aldridge a physician?

18 A. She's the physician assistant.

19 Q. Okay. Just turning to Page 108 towards the bottom, there
20 is a sub header that says preventative medicine and it
21 says, quote, immunizations; Influenza, have you had your
22 flu shot since the most recent September 1st, yes?

23 A. According to the records, it's yes. This is not my
24 record.

25 Q. That is -- okay. So just according to the records, it

1 looks like September -- between September 1st, 2017 --
2 strike that.

3 From the records, it appears that from
4 September 1st, 2017 to December 29th, 2017, some time in
5 that timeframe, Ms. Sturgill had a flu vaccine?

6 A. This is not my record, so --

7 Q. Just -- just according to the records?

8 A. It appears like that.

9 Q. Okay. That's all I have on that document. Actually, just
10 one more question. Do you think this physician assistant
11 would have indicated -- strike that.

12 Based on this record, Ms. Sturgill did not
13 refuse the flu vaccine in 2017, correct?

14 A. As I said, this is not my record.

15 Q. Just based on what you're reviewing as part of the medical
16 records that you produced?

17 A. Looks like she did.

18 Q. Okay. Moving onto medication.

19 A. Page?

20 Q. So we might have to jump around a bit, but let's start on
21 Page 68. And I just have some general questions. I'll
22 wait for you to turn to that page.

23 On Page 68, this appears to be consultation
24 notes dated October 18th, 2019. Dr. Angeles, are these
25 your notes or are these -- it looks like it's Sandra

1 Aldridge's notes. So just representing that it doesn't
2 appear that you authored this?

3 A. No, I did not. This is a consultation from another
4 physician.

5 Q. And just going through some basics the new symptom section
6 that's on the top of Page 68 Defendant's Exhibit 3, it
7 states, quote, toward the middle of the paragraph, quote,
8 patient states her insurance will no longer cover her
9 APRISO, but she will be going on her husband's insurance
10 in January 2020 and thinks his insurance will cover it.
11 Pentasa is not covered either. She does not know what
12 Mesalamine is covered by her insurance, but is requesting
13 a RDX for a Mesalamine that may be covered by her
14 insurance for two months until her insurance coverage
15 changes as she cannot afford the full cost of the APRISO,
16 end quote.

17 Do you recall plaintiff's disposition
18 towards medications?

19 A. The medications I gave her she took them.

20 Q. So she was willing to take medications to treat ailments?

21 A. For my -- for my side of the specialty, yes.

22 Q. And she was willing to take medications to prevent other
23 ailments, correct?

24 A. I don't give any medication for prevention.

25 Q. For pregnancy potentially, would there have been

1 medications prescribed to prevent a miscarriage?

2 A. I'm not expert. I'm not an OBGYN.

3 Q. Or the flu shot, for example, would be given to prevent

4 becoming ill from the flu?

5 A. Yes.

6 Q. And the record that you now authored earlier indicated

7 that she did not have any objection to preventive

8 measures?

9 A. According to the records of the consultants, yes.

10 Q. Can you turn to Page 3 and we'll go through some

11 medications? I'll need you to identify what these are.

12 A. Page 3?

13 Q. Yes. We're look at the bottom entitled medications. And

14 if you could help me out APRISO, what does that treat?

15 A. I'm not familiar with this medication, but it's for

16 treatment for Crohn's disease.

17 Q. Okay. And is that similar to Mesalamine?

18 A. I'm not a gastroenterologist.

19 Q. Okay. Do you know what Mesalamine is?

20 A. No, I don't.

21 Q. Okay. We've got Sertraline on there and we discussed that

22 earlier. That's for anxiety, is that correct?

23 A. Correct.

24 Q. The Aleve 220 milligram tablet. Is that just an

25 over-the-counter pain reliever?

1 A. Correct.

2 Q. And we've got Azelastine. Can you explain what that is?

3 A. That is a nasal spray given by ENT; ear, nose, and throat
4 specialist.

5 Q. And this is a steroid?

6 A. This is not a steroid.

7 Q. Okay. Flonase?

8 A. It is a steroid, nasal spray.

9 Q. And Vitamin B complex. What is that?

10 A. It's a vitamin.

11 Q. And why is that vitamin prescribed?

12 A. To supplement B complex. This is a common medication that
13 patients take over-the-counter.

14 Q. Is it for energy?

15 A. Possibly.

16 Q. Is it for pregnancy?

17 A. For what did you say? I'm sorry.

18 Q. Is it -- does the Vitamin B help with energy?

19 A. Supposedly.

20 Q. Does the Vitamin B help during pregnancy?

21 A. I don't know.

22 Q. In other words, why would Amiee Sturgill have been taking
23 a Vitamin B?

24 MR. KRASKA: If you remember.

25 Q. (BY MS. SHANNON): If you remember?

1 A. Pardon me?

2 MR. KRASKA: If you remember. If you remember
3 why.

4 Q. (BY MS. SHANNON): Do you recall why Amiee Sturgill was
5 taking Vitamin B?

6 A. No, I don't recall.

7 Q. Okay. Vitamin D3 -- what does that treat?

8 A. It's a supplement for bones, bone health.

9 Q. And Asprin 81 tablets indicated at the bottom. Is that
10 for pain relief as well?

11 A. It's a blood thinner.

12 Q. Did Amiee Sturgill use that during pregnancy?

13 A. Yes.

14 Q. And because these are indicated on this form, I'm just
15 going to back up before we turn to another page. Are
16 these medications that Amiee Sturgill was prescribed?

17 A. These are medications that we ask patients when they come
18 in with what medications they take.

19 Q. Oh. So she self-reported that she was taking --

20 A. Yes.

21 Q. -- these medications? That makes sense. Going to Page 2,
22 there is a medication of Prednisone. It says under
23 specified column down at the bottom. What's Prednisone
24 used for?

25 A. Excuse me. That is an anti-inflammatory medicine steroid.

1 Q. And elsewhere in the records, I'm looking for now, but I
2 cannot find it. It indicates that she took Simethicone,
3 Page 34. What is Simethicone?

4 A. It's an antacid.

5 Q. Oh, got it.

6 A. 34 did you say?

7 Q. If you're on Page 34 just in the middle of the document,
8 it says Mesalamine and it has APRISO in part -- as part of
9 a parenthetical. Is APRISO a brand name Mesalamine?

10 A. I don't know.

11 Q. Okay. I think we've been over all of these medications.
12 Could you turn to Page 117? And I'll just represent that
13 on Page 117 under current medication section in the top
14 third of the document says not taking slash PRN Entocort.
15 What is Entocort?

16 A. I don't know.

17 Q. Okay. Based on the records, would you say that Amiee
18 Sturgill was not opposed to taking medications?

19 A. I don't know about that.

20 Q. Well, just based on the number of medications that are
21 indicated in the record, would it appear that she's not
22 opposed to taking medications?

23 A. Well, from the OPTUM Rx, yes.

24 Q. With the Sertraline? The --

25 A. The Sertraline.

1 Q. Yes. And that was just a failure to refill, correct?

2 A. Correct.

3 Q. And you're not really surprised she didn't refill it,
4 correct?

5 A. No, I don't.

6 Q. She could of just gotten busy and not refilled it for a
7 few months?

8 A. Possibly, I don't know.

9 Q. But there's no indication on the OPTUM Rx letter that she
10 was refusing to take Sertraline?

11 A. No.

12 Q. Are there any indications in the records that she is
13 refusing to take any other medications?

14 A. I don't recall. I'd have to look at the pages.

15 Q. Would you say based on the discussion that was in the
16 notes on Page 68 where she was willingly discussing what
17 insurance would cover and wouldn't cover, that she
18 appeared pretty amenable to taking medications?

19 MR. KRASKA: I'm going to place an objection.

20 That wasn't the conversation that was with Dr. Angeles.

21 MS. SHANNON: Noted.

22 Q. (BY MS. SHANNON): Based on your review of the records,
23 Dr. Angeles, and representing that these were not authored
24 by you, but they were authored by Sandra Aldridge, again,
25 based on here, does it appear that plaintiff was not

1 opposed to taking medications?

2 A. This is not my notes, so --

3 Q. Yes. Representing it's not your notes, just based on your
4 review and based on the dozen plus medications that are
5 listed in these records, some of which are steroids, flu
6 vaccines, over-the-counter, would it appear in any way
7 that Ms. Sturgill was opposed to taking medication?

8 A. I cannot say that.

9 Q. If she was opposed to medication, would you have noted
10 this in your records?

11 A. I would -- you know, I would say yes, I have.

12 Q. Are you aware that in parts of your records where you
13 noted that she refused medication?

14 A. I cannot remember that.

15 Q. And what I'm trying to get at here is these records are
16 full of discussions of medications. Based on just an
17 average person myself reading the records, it appears like
18 that she's fine with taking medication, would that be a
19 reasonable assessment?

20 MR. KRASKA: Objection, asked and answered.

21 MS. SHANNON: I don't think she -- she answered
22 the first one.

23 Q. (BY MS. SHANNON): You can answer. Objections and I'll
24 back up here. Your attorney can make objections. Unless
25 it's an objection based on privilege, I'll ask you to

1 answer it, again, just also noting for the record that
2 there's no liability at issue for you here. The case is
3 entirely concerning Amiee Sturgill's religious objection
4 to taking the COVID-19 vaccine and her termination from
5 the American Red Cross on those grounds. So I'm just
6 asking looking at these records and this will likely draw
7 an asked and answered objection, does it appear that she
8 is opposed in any way to taking medications?

9 MR. KRASKA: Objection, asked and answered.

10 Q. (BY MS. SHANNON): Dr. Angeles, you can answer.

11 A. I'm only taking care of her medical -- simple medical
12 issues. The others that specialists are taking care of
13 her special needs.

14 Q. And I'm not getting to the treatment, but the medications,
15 is there any indication that she was continuing to refuse
16 medication?

17 A. I don't recall her continuously refusing medication.

18 Q. And if she had continuously refused medication, it would
19 be in your notes, correct?

20 A. I don't recall. I'd have to review the charts piece by
21 piece.

22 Q. So if a patient had continuously objected to medication,
23 there's a possibility that you could not note that in
24 their medical records?

25 A. I will have to write them down if she refused medication,

1 but I don't recall.

2 Q. And you don't have to recall independently. There are 202
3 pages of notes and I'm not -- I'm not asking you to recall
4 anything. I'm just asking if a plaintiff -- or strike
5 that.

6 If a patient had objected to a medication,
7 would you typically write that down in your notes?

8 A. I usually do.

9 Q. And if it's not in notes, can one infer that that likely
10 didn't happen?

11 A. Not necessarily.

12 Q. So if there's an objection to taking a medication, you
13 might not have noted that in the notes?

14 A. I don't know how to answer your question, but --

15 Q. Your notes are a full reflection of what you discussed
16 with a patient, correct?

17 A. Yeah, but I said I did not -- I'd have to look at each
18 page and see if she did that or not.

19 Q. I can represent to you, having reviewed every page of the
20 document, that there is one objection in the entire 202
21 pages?

22 A. Okay.

23 Q. I can indicate where that is for you in just a moment.

24 A. Okay.

25 Q. And Dr. Angeles, would you like to take a break or keep

1 going?

2 A. Keep going. If I need a break, I will talk to my lawyer.

3 Q. Okay. On a break or at some point later, I'll point to

4 you to that page, but I'll represent to you now there is

5 one decline for a flu vaccination in the records. I

6 understand that you have to -- to review your records to

7 be able to answer these questions based on your knowledge

8 there are 202 pages, they're voluminous. I'm just trying

9 to get to your practices with recording notes. So we can

10 determine if it's not in the notes, did it not happen, are

11 your notes an accurate, and hopefully, the physician's

12 assistant her notes an accurate recollection of what was

13 discussed at the appointment? We're just trying to get

14 into what happened and the only thing that we have to go

15 off of or what happened at Amiee Sturgill's medical visits

16 is right here, medical visits with you that is.

17 So again, just going back to basics about

18 medical records when a patient comes to visit you, you

19 record what you discuss during that visit in your notes,

20 correct?

21 A. Yes.

22 Q. And those are part of the patient file, correct?

23 A. Correct.

24 Q. It's important for you to record notes fully so when that

25 patient comes back again, you know what you discussed last

1 time, correct?

2 A. Yes.

3 Q. And so it's important to have accurate notes because if
4 the patient sees another doctor, they need to know the
5 patient's concerns, correct, just patient's medical
6 concerns?

7 A. Yes.

8 Q. So would it be a fair assessment to say that your notes
9 are an accurate record of the significant points discussed
10 during a medical visit, correct?

11 A. Are you saying my records are inaccurate?

12 Q. I'm not saying your records are inaccurate, no.

13 MS. SHANNON: Can we go off the record for a
14 moment?

15 (Off the record at 10:05 a.m.)

16 (Back on the record at 10:06 a.m.)

17 Q. (BY MS. SHANNON): Are your notes an accurate reflection
18 of what was discussed during a medical visit?

19 MR. KRASKA: Which medical visit?

20 Q. (BY MS. SHANNON): It just says A. I just said --

21 MS. SHANNON: Jenny, can you read back the
22 question?

23 THE REPORTER: Are your notes an accurate

24 reflection of what was discussed during a medical visit?

25 Q. (BY MS. SHANNON): So I mean, any medical visit. Is it

1 your goal for your notes to reflect what was discussed

2 during that visit?

3 A. Yes.

4 Q. Okay. And if it was important and it was discussed with a
5 patient, it's going in your notes, correct?

6 A. Yes.

7 Q. Okay. We can move on from that. And we were talking
8 about medications. Are you aware of any medications that
9 Amiee Sturgill had an allergy to?

10 A. I have to look at the physical. Just a second.

11 Q. And you can refer to Page 2 at the top.

12 A. Yeah.

13 Q. Okay. So on Page 2 what's been marked as Defendant's
14 Exhibit 3, there's a box toward the top of the page that's

15 titled allergies. Dr. Angeles, did Amiee Sturgill have
16 any allergies to medications?

17 A. According to my record, Clindamycin. She had rash.

18 Tetracycline she had a rash. Flagyl she had a rash.

19 Codeine she had a rash.

20 Q. And Biaxin, she had a stomach upset?

21 A. Stomach upset.

22 Q. And are these self-reported allergies?

23 A. These are self-reported allergies.

24 Q. And by self-reported, that means that Amiee Sturgill told
25 you about it?

1 A. Correct.

2 Q. And Amiee Sturgill reported experiencing these symptoms
3 after taking the medication, correct?

4 A. Correct.

5 Q. Okay. I would like to move onto -- and we're toward the
6 end here. We're almost done. Toward the COVID-19
7 vaccine. So the COVID-19 vaccine bit of a charged
8 situation. Do you recall any patients being concerned
9 with blood clotting issues arising from taking the
10 COVID-19 vaccine?

11 A. No.

12 Q. So no patient appeared --

13 A. My patients.

14 Q. Okay. None of your parents said I don't want this vaccine
15 because I'm concerned about blood clotting side effects?

16 A. No.

17 Q. Okay. So that would include Amiee Sturgill, Amiee
18 Sturgill never brought that concern to your attention?

19 A. No.

20 Q. Okay. Pregnancy in the COVID vaccines, did you have any
21 patients that had concerns about taking the COVID-19
22 vaccine while pregnant?

23 A. I don't have any pregnant patients.

24 Q. You treated -- well, just strike that.

25 You didn't have any pregnant patients from

1 2021 until the present?

2 A. No.

3 Q. Okay. And you never heard any patients say that they were
4 trying to get pregnant otherwise did not want to take the
5 COVID-19 vaccine?

6 A. No.

7 Q. Do you recall hearing just in the medical community that
8 there were concerns about the COVID-19 vaccine and
9 pregnancy?

10 A. No.

11 Q. Did you recall hearing in the medical community that there
12 were concerns about the COVID-19 vaccine and blood
13 clotting disorders?

14 A. No, only the infection.

15 Q. And what do you mean by infection?

16 A. COVID infection can cause blood clots.

17 Q. Do you recall, either from your notes independently,
18 whether Amiee Sturgill was opposed to getting COVID-19
19 vaccine?

20 A. She did not want any COVID vaccine.

21 Q. Do you recall why?

22 A. I don't.

23 Q. And again, just representing on the record the reason why
24 we're here is that Amiee Sturgill sued the American Red
25 Cross after she refused to receive the vaccine. She said

1 that the vaccine was against her religious beliefs as a
2 Christian of some subset of Christianity. Did plaintiff
3 refuse any medications, to your knowledge, on the basis of
4 her religion?

5 A. No.

6 Q. Did Amiee Sturgill refuse any treatments, to your
7 knowledge, on the basis of her religion?

8 A. No.

9 Q. Did Amiee Sturgill refuse any medical procedures on the
10 basis of her religion?

11 A. No.

12 Q. Did Amiee Sturgill ever discuss her religion with you?

13 A. No.

14 Q. That's all of the questions I have.

15 (Deposition concluded at 10:12 a.m.)

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1 CERTIFICATE

2

3 STATE OF MICHIGAN)

4)SS

5 COUNTY OF OAKLAND)

6

7

8 I certify that this transcript, consisting of 42
9 pages, is a complete, true, and correct record of the
10 testimony of DR. DAISY ANGELES held in this case on
11 Thursday, August 3, 2023.

12 I also certify that prior to taking this
13 deposition DR. DAISY ANGELES was duly sworn to tell the
14 truth.

15

16

17

18 _____

19 JENNIFER CLAUSON, CSR 6867

20 Notary Public, Oakland County, Michigan

21 My Commission expires: 10-16-2025

22

23

24

25

08/03/2023

Angeles, Daisy

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